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Jeanine Busby	(Depositor's name)
	(Signature)
8-8-05	(Date)

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 08/963,656 11/03/1997 CRAIG J. GERARD 1351 *********

1855,1005-010

ANTIRODIES TO C-C CHEMOKINE RECEPTOR 3 PROTEIN (AS AMENDED)

APPLN. TYPE	SMALL ENTITY	ISSUE F	FEE PUBLICATION FEE		TOTAL	FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400)	\$0		1400	08/02/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS]			
MURPHY,	JOSEPH F	1646	6	536-023100				
. Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		Hamilton, Brook, Smithe				
ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATEN	T (print or type)			•	

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

(A) NAME OF ASSIGNEE 1) Children's Medical Center Corp.

Boston, MA 2) Millennium Pharmaceuticals, Inc.

Cambridge, MA

Brigham & Women's Hospital

3) Brigham & Women's Hospital Boston, MA Please check the appropriate assignce category or categories (will not be printed on the patent).

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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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